

Report: Policy Level - CMP Claim Summary Report

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090306	CLAIMANT COUNT: 1	STATUS: Open	
DATE OF LOSS: 01/20/2010	DATE REPORTED: 03/25/2010	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD ALLEGEDLY STOLE MOTHER-IN-LAWS PURSE & MONEY			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	0.00	11.00	0.00	11.00
EXPENSE	0.00	0.00	0.00	0.00
	0.00	11.00	0.00	11.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090296	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 01/16/2010	DATE REPORTED: 03/11/2010	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD ALLEGEDLY STOLE FROM FOSTER PARENT'S			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	0.00	0.00	0.00	0.00
EXPENSE	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090288	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 01/05/2010	DATE REPORTED: 02/03/2010	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD KICKED BOOT AND DAMAGED CLAIMANT'S TELEVISION			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	549.00	0.00	0.00	549.00
EXPENSE	0.00	0.00	0.00	0.00
	549.00	0.00	0.00	549.00

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090257	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 11/19/2009	DATE REPORTED: 11/30/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED HOME IN TEMPER TANTRUM			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	275.00	0.00	0.00	275.00
EXPENSE	0.00	0.00	0.00	0.00
	275.00	0.00	0.00	275.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090299	CLAIMANT COUNT: 1	STATUS: Open	
DATE OF LOSS: 10/26/2009	DATE REPORTED: 03/16/2010	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD CUT COUCH WITH SCISSORS			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	0.00	2,000.00	0.00	2,000.00
EXPENSE	0.00	0.00	0.00	0.00
	0.00	2,000.00	0.00	2,000.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090218	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 09/07/2009	DATE REPORTED: 09/30/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD THROWING ROCKS WHICH DAMAGED A PARKED CAR			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	210.00	0.00	0.00	210.00
EXPENSE	0.00	0.00	0.00	0.00
	210.00	0.00	0.00	210.00

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090272		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 03/28/2009		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD SPIT NUMEROUS TIMES ON WALLS					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	1,687.52	0.00	0.00	1,687.52	
EXPENSE	213.36	0.00	0.00	213.36	
	1,900.88	0.00	0.00	1,900.88	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090278		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 02/28/2009		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD #2 URINATED & SPREAD FECAL MATTER ON NUMEROUS OCCASSIONS					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	2,431.99	0.00	0.00	2,431.99	
EXPENSE	213.36	0.00	0.00	213.36	
2,645.35		0.00	0.00	2,645.35	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090277		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 01/28/2009		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD #2 DAMAGED WALLPAPER					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	1,815.47	0.00	0.00	1,815.47	
EXPENSE	213.36	0.00	0.00	213.36	
	2,028.83	0.00	0.00	2,028.83	

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Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090276		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 12/28/2008		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD URINATED IN BED FREQUENTLY					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	214.10	0.00	0.00	214.10	
EXPENSE	213.36	0.00	0.00	213.36	
	427.46	0.00	0.00	427.46	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090275		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 11/28/2008		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD BROKE DISHWASHER					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	110.00	0.00	0.00	110.00	
EXPENSE	213.36	0.00	0.00	213.36	
	323.36	0.00	0.00	323.36	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090274		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 10/28/2008		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD TANTRUMS OF BREAKING CONTENTS					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	978.60	0.00	0.00	978.60	
EXPENSE	213.36	0.00	0.00	213.36	
	1,191.96	0.00	0.00	1,191.96	

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Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090273		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 09/28/2008		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED WALLPAPER					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	507.83	0.00	0.00	507.83	
EXPENSE	213.36	0.00	0.00	213.36	
	721.19	0.00	0.00	721.19	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2009
CLAIM: 92090220		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 08/28/2008		DATE REPORTED: 09/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD URINATED ON CARPET & WALLS WEEKLY					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	5,000.00	0.00	0.00	5,000.00	
EXPENSE	213.30	0.00	0.00	213.30	
	5,213.30	0.00	0.00	5,213.30	
POLICY TOTALS:		15,486.33	2,011.00	0.00	17,497.33

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090167	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 05/20/2009	DATE REPORTED: 05/20/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED PROPERTY			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	375.00	0.00	0.00	375.00
EXPENSE	0.00	0.00	0.00	0.00
	375.00	0.00	0.00	375.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090156	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 05/10/2009	DATE REPORTED: 05/22/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED REFRIGERATOR			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	1,280.00	0.00	0.00	1,280.00
EXPENSE	0.00	0.00	0.00	0.00
	1,280.00	0.00	0.00	1,280.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090224	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 05/02/2009	DATE REPORTED: 08/28/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED HEADBOARD #8			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	0.00	0.00	0.00	0.00
EXPENSE	155.28	0.00	0.00	155.28
	155.28	0.00	0.00	155.28

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Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090223	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 04/10/2009	DATE REPORTED: 08/28/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED DRESSER #7			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	0.00	0.00	0.00	0.00
EXPENSE	155.28	0.00	0.00	155.28
	155.28	0.00	0.00	155.28

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090176	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 04/08/2009	DATE REPORTED: 04/08/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD BROKE DOOR & DAMAGED WALLS IN TANTRUM			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	375.00	0.00	0.00	375.00
EXPENSE	0.00	0.00	0.00	0.00
	375.00	0.00	0.00	375.00

ACCOUNT NUMBER: 9200001603	INSURED NAME: MONTANA DEPT OF PUBLIC	POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090187	CLAIMANT COUNT: 1	STATUS: Closed	
DATE OF LOSS: 03/15/2009	DATE REPORTED: 08/13/2009	LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED FOSTER PARENTS PROPERTY ON SEVERAL OCCASIONS			

	GROSS PAID TO DATE	RESERVE	RECOVERY	NET TOTAL INC
INDEMNITY	0.00	0.00	0.00	0.00
EXPENSE	0.00	0.00	0.00	0.00
	0.00	0.00	0.00	0.00

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090135		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 03/13/2009		DATE REPORTED: 03/23/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD STOLE MONEY					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	0.00	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090222		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 03/02/2009		DATE REPORTED: 08/28/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED CARPET #6					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	391.21	0.00	0.00	391.21	
EXPENSE	155.28	0.00	0.00	155.28	
	546.49	0.00	0.00	546.49	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090221		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 02/02/2009		DATE REPORTED: 08/28/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED BYPASS DOOR					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	155.28	0.00	0.00	155.28	
	155.28	0.00	0.00	155.28	

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090124		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 01/09/2009		DATE REPORTED: 02/05/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD CUT UP FOSTER PARENT'S CHAIR					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	249.00	0.00	0.00	249.00	
EXPENSE	0.00	0.00	0.00	0.00	
249.00		0.00	0.00	249.00	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090190		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 12/02/2008		DATE REPORTED: 08/14/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD TWISTED FOSTER PARENT'S GLASSES					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	107.80	0.00	0.00	107.80	
EXPENSE	155.29	0.00	0.00	155.29	
	263.09	0.00	0.00	263.09	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090134		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 12/01/2008		DATE REPORTED: 03/18/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD BROKE PICTURE WINDOW					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	758.00	0.00	0.00	758.00	
EXPENSE	0.00	0.00	0.00	0.00	
758.00		0.00	0.00	758.00	

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090146		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 11/28/2008		DATE REPORTED: 04/10/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD URINATED ON CHAIR & MATTRESS					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	1,682.33	0.00	0.00	1,682.33	
EXPENSE	155.28	0.00	0.00	155.28	
	1,837.61	0.00	0.00	1,837.61	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090119		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 11/26/2008		DATE REPORTED: 01/28/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: TWO FOSTER CHILDREN BROKE FOSTER PARENT'S CHAIR					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	0.00	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090088		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 11/06/2008		DATE REPORTED: 11/13/2008		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD THREW A BOOT THROUGH A WINDOW					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	0.00	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090122		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 10/01/2008		DATE REPORTED: 02/03/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD WET THE BED					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	0.00	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090164		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 09/01/2008		DATE REPORTED: 05/21/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD STOLE VEHICLE, ACTUAL DOL APRIL 2008					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	514.00	0.00	0.00	514.00	
EXPENSE	0.00	0.00	0.00	0.00	
	514.00	0.00	0.00	514.00	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090102		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 07/11/2008		DATE REPORTED: 12/12/2008		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED INSURED VEHICLE WITH A ROCK					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	165.00	0.00	0.00	165.00	
EXPENSE	0.00	0.00	0.00	0.00	
	165.00	0.00	0.00	165.00	

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Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090117		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 05/31/2008		DATE REPORTED: 01/28/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED FOSTER PARENT'S PROPERTY					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	0.00	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090092		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 05/18/2008		DATE REPORTED: 11/24/2008		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER SON STOLE FOSTER PARENT'S VEHICLE, TOOK KEYS AWAY WHEN HE CAME HOME, HE ASSULTED FOSTER PARENT,ACTUAL DOL 5-					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	796.20	0.00	0.00	796.20	
	796.20	0.00	0.00	796.20	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090123		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 05/01/2008		DATE REPORTED: 03/10/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD DAMAGED CARPET					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	0.00	0.00	0.00	0.00	
EXPENSE	0.00	0.00	0.00	0.00	
	0.00	0.00	0.00	0.00	

Report: Policy Level - CMP Claim Summary Report

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Run Date / Time: 04/12/2010 04:39:15 PM

Program Name: AMERICAN RE

Account Name: MONTANA DEPT OF PUBLIC HEALTH

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090137		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 04/10/2008		DATE REPORTED: 03/18/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD URINATED ON THE PARENT'S BED & CARPET, ACTUAL DOL IS 4-10-08					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	1,615.21	0.00	0.00	1,615.21	
EXPENSE	155.29	0.00	0.00	155.29	
	1,770.50	0.00	0.00	1,770.50	

ACCOUNT NUMBER: 9200001603		INSURED NAME: MONTANA DEPT OF PUBLIC		POLICY NUMBER: 993G100225	EFFECTIVE DATE: 09/01/2008
CLAIM: 92090136		CLAIMANT COUNT: 1		STATUS: Closed	
DATE OF LOSS: 03/30/2008		DATE REPORTED: 03/19/2009		LITIGATED? N	
ACCIDENT DESCRIPTION: FOSTER CHILD URINATED ON BED & CARPET, ACTUAL DOL 3-30-08					
GROSS PAID TO DATE		RESERVE	RECOVERY	NET TOTAL INC	
INDEMNITY	1,449.00	0.00	0.00	1,449.00	
EXPENSE	0.00	0.00	0.00	0.00	
1,449.00		0.00	0.00	1,449.00	
POLICY TOTALS:		10,844.73	0.00	0.00	10,844.73